PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

ipplication or Docket Number

09/762579

CLAIMS AS FILED - PART I (Column 1)					Sim.			WALL ENTITY YPE (OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS							Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	10.8 0
TOTAL CHARGEABLE CLAIMS			5 minus 20=					X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =					X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, ent					r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	840
CLAIMS AS AMENDED - PART											OTHER	
		(Column 1)		(Colu	mn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	,
	Independent	•	Minus	***		=		X40=	Ÿ	OR	X80=	
Ľ	FIRST PRESE	NTATION OF M		PENDEN	T CLAIM		ا ا	+135=	-	OR	+270=	
							L	TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)	(Column 3)		ADDIT. FEE			AUUII. PEEI				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	mn 2) HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL AU	=		X40=		OR	X80=	
-	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	LCLAIM		, [+135=		OR	+270=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		NODII. I EL I			ADDIT: 1 EE	
AMENDMENT C;		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	\rfloor	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	1	X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDEN				T CLAIM		┚┞					
	If the entry in colu	ımn 1 is less than t	he entry in coli	umn 2. writ	te "0" in co	olumn 3.	Ĺ	+135=		OR	+270=	-
••	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											